

SUPREME COURT OF THE STATE OF NEW YORK COUNTY OF NEW YORK <hr/> FRANCIS J. KEATING, JR., Plaintiffs, - against - AIR & LIQUID SYSTEMS CORPORATION, et al., Defendants. <hr/>	STATEMENT OF SERVICE BY MAIL AND ACKNOWLEDGEMENT OF RECEIPT BY MAIL OF SUMMONS AND COMPLAINT INDEX NO. 190384/2018 Date of Filing: 10/10/18
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CBS Corporation, a Delaware Corporation, f/k/a Viacom Inc., successor by merger to CBS Corporation, a Pennsylvania Corporation, f/k/a Westinghouse Electric Corporation
c/o Corporation Service Company
80 State Street
Albany, NY 12207

The enclosed Summons and Complaint are served pursuant to § 312-a of the Civil Practice Law and Rules.

To avoid being charged with the expense of service upon you, you must sign, date and complete the Acknowledgment part of this form and mail or deliver one copy of the completed form to the sender within thirty (30) days from the date you receive it. You should keep a copy for your records or your attorney. If you wish to consult an attorney, you should do so as soon as possible before the thirty (30) days expire.

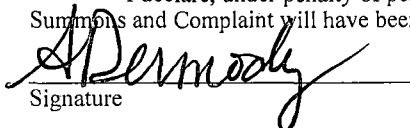
If you do not complete and return the form to the sender within thirty (30) days, you (or the party on whose behalf you are being served) will be required to pay any expenses incurred in serving a summons and complaint in any other manner permitted by law, and the cost of such service as permitted by law will be entered as a judgment against you.

If you have received a Complaint with this statement, the return of this statement and Acknowledgment does not relieve you of the necessity to answer the Complaint. The time to answer expires twenty (20) days after the day you mail or deliver this form to the sender. If you wish to consult an attorney, you should do so as soon as possible before the twenty (20) days expire.

If you are served on behalf of a corporation, unincorporated association, partnership or other entity, you must indicate under your signature your relationship to the entity. If you are served on behalf of another person and you are authorized to receive process, you must indicate under your signature your authority.

It is a crime to forge a signature or to make a false entry on this statement or on the Acknowledgment.

I declare, under penalty of perjury, that this Statement of Service by Mail and Acknowledgement of Receipt by Mail of Summons and Complaint will have been mailed on October 11, 2018.


Signature

October 11, 2018
[Date of Signature]

Levy Konigsberg LLP, 800 Third Avenue, 11th Floor, New York, New York 10022
Address

ACKNOWLEDGMENT OF RECEIPT OF SUMMONS AND COMPLAINT

I received a Summons and Complaint in the above-captioned matter at [INSERT ADDRESS] _____

PLEASE CHECK ONE OF THE FOLLOWING;

IF 2 IS CHECKED, COMPLETE AS INDICATED

- ☐ 1. I am not in the military service.
☐ 2. I am in military service and my rank, serial number and branch of service are as follows: _____
Branch of Service: _____

Serial Number: _____

TO BE COMPLETED REGARDLESS OF MILITARY STATUS:

Date: _____
(Date this Acknowledgment is executed)

I affirm the above as true under penalty of perjury.

Signature

Print Name

Name of Defendant for which acting

Position with Defendant for which acting (i.e., officer, attorney, etc.)
Please Complete All Blanks Including Dates

**SUPREME COURT OF THE STATE OF NEW YORK
COUNTY OF NEW YORK**

-----x
FRANCIS J. KEATING JR

Plaintiff/Petitioner,

-against-

Index No. 190384/2018

AIR & LIQUID SYSTEMS CORPORATION,
as successor by merger to Buffalo Pumps,

Defendant/Respondent.
-----x

NOTICE OF ELECTRONIC FILING

You have received this Notice because:

- The Plaintiff/Petitioner, whose name is listed above, has filed this case using the New York State Courts e-filing system, and
- You are a Defendant/Respondent (a party) in this case.
(CPLR § 2111, Uniform Rule § 202.5-bb)

If you are represented by an attorney: give this Notice to your attorney. (Attorneys: see "Information for Attorneys" pg. 2).

If you are not represented by an attorney: you are not required to e-file. You may serve and file documents in paper form and you must be served with documents in paper form. However, as a party without an attorney, you may participate in e-filing.

Benefits of E-Filing

You can:

- serve and file your documents electronically
- view your case file on-line
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- pay any court fees on-line.

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- visit: www.nycourts.gov/efile-unrepresented or
- go to the Help Center or Clerk's Office at the court where the case was filed. To find legal information to help you represent yourself visit www.nycourthelp.gov

Information for Attorneys

An attorney representing a party who is served with this notice must either:

- 1) immediately record his or her representation within the e-filed matter on the NYSCEF site <https://iapps.courts.state.ny.us/nyscef/HomePage>; or
- 2) file the Notice of Opt-Out form with the clerk of the court where this action is pending. Exemptions from mandatory e-filing are limited to attorneys who certify in good faith that they lack the computer hardware and/or scanner and/or internet connection or that they lack (along with all employees subject to their direction) the operational knowledge to comply with e-filing requirements. [Section 202.5-bb(e)]

For additional information about electronic filing and to create a NYSCEF account, visit the NYSCEF website at www.nycourts.gov/efile or contact the NYSCEF Resource Center (phone: 646-386-3033; e-mail: efile@nycourts.gov).

Dated: 10/10/201

KEITH BINDER

Name

800 Third Avenue, 11 Floor

Address

Levy Konigsberg, LLP

Firm Name

New York, NY 10022

6467345197

Phone

kbinder@lpklaw.com

E-Mail

To: All Named Defendants

11/20/17

FILED: NEW YORK COUNTY CLERK 10/10/2018 03:41 PM

INDEX NO. 190384/2018

NYSCEF DOC. NO. 1

RECEIVED NYSCEF: 10/10/2018

SUPREME COURT OF THE STATE OF NEW YORK
ALL COUNTIES WITHIN THE CITY OF NEW YORK

----- X
IN RE: NEW YORK CITY
ABESTOS LITIGATION
-----X

New York City
Abestos Litigation
Index No.:
DOF:

SUMMONS

FRANCIS J. KEATING, JR.,

Plaintiffs,

- against -

**Plaintiffs Designate
NEW YORK COUNTY
as the place of trial**

AIR & LIQUID SYSTEMS CORPORATION,
as successor by merger to Buffalo Pumps, Inc.;
ARMSTRONG INTERNATIONAL, INC. ;
ATWOOD & MORRILL CO., INC. ;
AURORA PUMP COMPANY;
CBS Corporation, a Delaware Corporation, f/k/a Viacom Inc.,
successor by merger to CBS Corporation, a Pennsylvania
Corporation, f/k/a Westinghouse Electric Corporation;

**Basis for venue is
Defendants' place of
business**

CARRIER CORPORATION;
COPELAND CORPORATION LLC;
CRANE CO.;
DCo LLC,
formerly known as Dana Companies, LLC;
ELLIOTT COMPANY;
FALK CORPORATION;
FMC CORPORATION,
on behalf of its former Peerless Pump and Northern Pump
business;

FOSTER WHEELER, LLC,
survivor to a merger with Foster Foster Wheeler
Corporation;

GARDNER DENVER, INC.;
GENERAL ELECTRIC COMPANY;
GOULDS PUMPS LLC,
f/k/a Goulds Pumps Incorporated;

IMO INDUSTRIES, INC.;
INDUSTRY PRODUCTS CO.;
INGERSOLL-RAND COMPANY;
JOHN CRANE INC.;
JOHNSON CONTROLS, INC.,
individually and as successor to Kieley & Mueller, Inc.;

R.E. HEBERT & COMPANY;
ROCHESTER INDUSTRIAL INSULATION
SPIRAX SARCO, INC.;
SPX COOLING TECHNOLOGIES, INC.,

individually and as successor to Marley Cooling
Technologies, Inc. and The Marley Cooling Tower
Company;

SYRACUSE SUPPLY COMPANY;
TECUMSEH PRODUCTS COMPANY LLC;

{00414308,DOCX}

THE NASH ENGINEERING COMPANY;
 TRANE U.S. INC.,
 f/k/a American Standard Inc.;
 UNION CARBIDE CORPORATION;
 WARREN PUMPS LLC; and
 YORK INTERNATIONAL,

Defendants.

TO THE ABOVE NAMED DEFENDANTS:

YOU ARE HEREBY SUMMONED and required to serve upon Plaintiff's attorney, at the address stated below, an answer to the attached complaint within twenty (20) days after the service of this summons, exclusive of the day of service, or within thirty (30) days after service is complete if this summons was not personally delivered to you within the State of New York; upon your failure to answer, judgment will be taken against you by default for the relief demanded in the complaint.

Dated: New York, New York
 October 10, 2018

LEVY KONIGSBERG LLP



KEITH W. BINDER

800 Third Avenue, 11th Floor
 New York, NY 10022
 (212) 605-6200
Attorneys for Plaintiffs

To:
 AIR & LIQUID SYSTEMS CORPORATION, as
 successor by merger to Buffalo Pumps, Inc.
 c/o Corporation Service Company
 80 State Street
 Albany, NY 12207

CARRIER CORPORATION
 c/o CT Corporation System
 111 Eighth Avenue
 New York, NY 10011

ARMSTRONG INTERNATIONAL, INC.
 900 Maple Street
 Three Rivers, MI 49093

CBS Corporation, a Delaware Corporation, f/k/a
 Viacom Inc., successor by merger to CBS
 Corporation, a Pennsylvania Corporation, f/k/a
 Westinghouse Electric Corporation
 c/o Corporation Service Company
 80 State Street
 Albany, NY 12207

ATWOOD & MORRILL CO., INC.
 c/o CT Corporation System
 111 Eighth Avenue
 New York, NY 10011

Copeland Corporation LLC
 c/o The Corporation Trust Company
 1209 Orange Street
 Wilmington, DE 19801

AURORA PUMP COMPANY
 Attn: Kevin Keyes
 13320-A Ballantyne Corporate Place
 Charlotte, NC 28277

CRANE CO.
 c/o CT Corporation System

111 Eighth Avenue
New York, NY 10011
DCo LLC, formerly known as Dana Companies,
LLC
c/o CT Corporation System
4701 Cox Road, Suite 285
Glen Allen, VA 23060

ELLIOTT COMPANY
c/o CT Corporation System
116 Pine Street, Suite 320
Harrisburg, PA 17101

FALK CORPORATION
c/o CT Corporation System
8025 Excelsior Drive, Suite 200
Madison, WI 53717

FMC CORPORATION, on behalf of its former
Peerless Pump and Northern Pump business
1735 Market Street
Philadelphia, PA 19103

Foster Wheeler, LLC, survivor to a merger with
Foster Wheeler Corporation
UNITED AGENT GROUP INC.
11380 PROSPERITY FARMS ROAD #221E
PALM BEACH GARDENS, FL 33410

Gardner Denver, Inc.
c/o CT Corporation System
111 EIGHTH AVENUE
NEW YORK, NY 10011

GENERAL ELECTRIC COMPANY
Henry J. King, Jr., Esq., Managing Attorney,
Electric Insurance Company
75 Sam Fonzo Drive
Beverly, MA 01915

Goulds Pumps LLC f/k/a Goulds Pumps
Incorporated
c/o The Corporation Trust Company
1209 Orange Street
Wilmington, DE 19801

IMO INDUSTRIES, INC.
c/o CT Corporation System
111 EIGHTH AVENUE
NEW YORK, NY 10011

Industry Products Co.
c/o Linda Cleveland
500 Statler Road
Piqua, OH 45356

INGERSOLL-RAND COMPANY
c/o Corporation Service Company
327 Hillsborough St.
Raleigh, NC 27603

JOHN CRANE INC.
c/o CT Corporation System
111 EIGHTH AVENUE
NEW YORK, NY 10011

JOHNSON CONTROLS, INC., individually and
as successor to Kieley & Mueller, Inc.
c/o CT Corporation System
111 EIGHTH AVENUE
NEW YORK, NY 10011

ROCHESTER INDUSTRIAL INSULATIONS
INC.
c/o Underberg & Kessler LLP
300 Bausch & Lomb Place
Rochester, NY 14604

SPIRAX SARCO, INC.
c/o CT Corporation
111 Eighth Avenue
New York, NY 10011

SPX COOLING TECHNOLOGIES, INC.,
individually and as successor to Marley Cooling
Technologies, Inc. and The Marley Cooling Tower
Company
c/o The Corporation Trust Company
1209 Orange Street
Wilmington, DE 19801

Tecumseh Products Company LLC
c/o The Corporation Company
40600 Ann Arbor Road E, Suite 201
Plymouth, MI 48170

THE NASH ENGINEERING COMPANY
c/o Corporation Service Company
80 State Street
Albany, NY 12207

FILED: NEW YORK COUNTY CLERK 10/10/2018 03:41 PM

INDEX NO. 190384/2018

NYSCEF DOC. NO. 1

RECEIVED NYSCEF: 10/10/2018

Trane U.S. Inc., f/k/a American Standard Inc.
One Centennial Avenue, PO Box 6820
Piscataway, NJ 08855

UNION CARBIDE CORPORATION
c/o CT Corporation System
111 EIGHTH AVENUE
NEW YORK, NY 10011

WARREN PUMPS LLC

c/o CT Corporation System
155 Federal Street, Suite 700
Boston, MA 02110

YORK INTERNATIONAL
c/o CT Corporation System
111 Eighth Avenue
New York, NY 10011

Via Secretary of State
SYRACUSE SUPPLY COMPANY
R.E. Hebert and Company, Inc.

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SUPREME COURT OF THE STATE OF NEW YORK
ALL COUNTIES WITHIN THE CITY OF NEW YORK

New York City
Asbestos Litigation

-----X
IN RE: NEW YORK CITY
ABESTOS LITIGATION
-----X

Index No.:

DOF:

FRANCIS J. KEATING, JR.,

Plaintiffs,

COMPLAINT

- against -

Plaintiffs Demand A
Trial by jury

AIR & LIQUID SYSTEMS CORPORATION,
as successor by merger to Buffalo Pumps, Inc.;
ARMSTRONG INTERNATIONAL, INC. ;
ATWOOD & MORRILL CO., INC. ;
AURORA PUMP COMPANY;
CBS Corporation, a Delaware Corporation, f/k/a Viacom
Inc., successor by merger to CBS Corporation, a
Pennsylvania Corporation, f/k/a Westinghouse
Electric Corporation;
CARRIER CORPORATION;
COPELAND CORPORATION LLC;
CRANE CO.;
DCo LLC,
formerly known as Dana Companies, LLC;
ELLIOTT COMPANY;
FALK CORPORATION;
FMC CORPORATION,
on behalf of its former Peerless Pump and
Northern Pump business;
FOSTER WHEELER, LLC,
survivor to a merger with Foster Foster Wheeler
Corporation;
GARDNER DENVER, INC.;
GENERAL ELECTRIC COMPANY;
GOULDS PUMPS LLC,
f/k/a Goulds Pumps Incorporated;
IMO INDUSTRIES, INC.;
INDUSTRY PRODUCTS CO.;
INGERSOLL-RAND COMPANY;
JOHN CRANE INC.;
JOHNSON CONTROLS, INC.,
individually and as successor to Kieley &
Mueller, Inc.;
R.E. HEBERT & COMPANY;
ROCHESTER INDUSTRIAL INSULATION
SPIRAX SARCO, INC.;

{00414308.DOCX}

SPX COOLING TECHNOLOGIES, INC.,
 individually and as successor to Marley
 Cooling Technologies, Inc. and The Marley
 Cooling Tower Company;
 SYRACUSE SUPPLY COMPANY;
 TECUMSEH PRODUCTS COMPANY LLC;
 THE NASH ENGINEERING COMPANY;
 TRANE U.S. INC.,
 f/k/a American Standard Inc.;
 UNION CARBIDE CORPORATION;
 WARREN PUMPS LLC; and
 YORK INTERNATIONAL,

Defendants.


TO THE ABOVE NAMED DEFENDANTS:

Plaintiff, by his attorneys, LEVY KONIGSBERG LLP, for his Complaint, respectfully allege as follows:

1. Plaintiff repeats and re-alleges Levy Konigsberg LLP's Standard Asbestos Complaint for Personal Injury dated May 11, 2018 as if fully incorporated herein.
2. Plaintiff is presently a citizen of the State of Arizona.
3. On October 5, 2018 Plaintiff provided a Social Security authorization to Record Trak.
4. Plaintiff, FRANCIS J. KEATING, JR., was diagnosed with Lung Cancer, Stage III or greater, which meets the minimum requirement for activation into the active docket pursuant to the Case Management Order governing these actions.

Dated: New York, New York
 October 10, 2018

LEVY KONIGSBERG, L.L.P.


 By: KEITH W. BINDER
 800 Third Avenue, 11th Floor
 New York, NY 10022
 (212) 605-6200

Attorneys for Plaintiffs

SUPREME COURT: ALL COUNTIES
WITHIN THE CITY OF NEW YORK

-----X

IN RE NEW YORK CITY ASBESTOS LITIGATION

**PLAINTIFF'S INITIAL
FACT SHEET**

-----X

This Document Relates To:
All Cases

-----X

This Form is to be filed with each action brought within the counties of New York claiming an asbestos-related disease as provided by Section VII of the Case Management Order dated June 20, 2017.

For each claimant or deceased claimant, please answer each of the following questions:

1. Full Name: Francis J. Keating Jr.
2. Date of Birth: 10/28/1936
3. Address: 3513 W Grovers Ave, Glendale, Arizona 85308
4. Social Security Number:
5. Union/Local/Years of Membership: N/A
6. Date of claimant's first claimed asbestos exposure: Approximately 1953.
7. Smoking History: Never Smoked ☐

For all cigarettes, pipes, cigars, please state the inclusive dates of claimant's smoking history, the products smoked and the amount of product consumed per day:

Plaintiff started smoking in approximately 1953. His preferred brand was Pall Mall cigarettes. Plaintiff smoked approximately one pack per day. Plaintiff quit smoking in approximately 2000.

8. At this preliminary stage of the proceedings, please provide as much of the following information as is presently available: worksites, inclusive dates, and trade or occupation for each site. (each worksite should be identified as specifically as possible (i.e., ships worked on in a given shipyard):

Plaintiff was in the US Navy from approximately 1953-1974. He worked as a machinist mate aboard approximately 9 different ships. During his Naval service, Plaintiff was at the Brooklyn Navy Yard and potentially other shipyards. Plaintiff was exposed to asbestos at the Brooklyn Navy Yard. Later, Plaintiff worked at the Eastman Kodak Facility in Rochester, NY from approximately 1974 until the mid-90s. He then worked at the Motorola plant from approximately

{00415591.DOCX}

the mid-80s until an unspecified year. He then worked at the Palo Verde Nuclear Power Plant in Tonopah, Arizona up until approximately 2004.

9. Claimed asbestos-related disease, including date of diagnosis, name of diagnosing physician or institution if known (an attached medical report would be helpful but is optional).

Non-small Cell **Lung Cancer**, Adenocarcinoma (**Stage III**). Potential metastasis to glands and spine. Records note bilateral lung multifocal calcified pleural plaques and extensive asbestos plaques. The date of diagnosis is August 2018 at the Mayo Clinic in Arizona under Dr. Schield.

{00415591.DOCX}

Result type: Oncology Consult
Result date: Aug 15, 2018, 04:51 p.m.
Result status: authenticated
Performed by: Helen Ross
Verified by: Helen Ross
Modified by: Helen Ross

Patient:	KEATING, FRANCIS J	DOB:
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REFERRED BY: Dr. Sakata

CHIEF COMPLAINT: Lung cancer, adenocarcinoma, likely stage III in the setting of prior tobacco use and asbestos exposure.

HISTORY OF PRESENT ILLNESS: Mr. Keating is a very pleasant 81-year-old gentleman seen for recommendations for a newly diagnosed lung cancer. He presented to a local clinic in Heber with back pain and imaging showed a lung mass, hence the back pain evaluation was put on hold while he has undergone evaluation. Initially he was thought to have mesothelioma as he has extensive asbestos plaques, but those areas were cold on PET/CT and biopsy shows adenocarcinoma but does not contain sufficient cancer cells for further testing. EBUS was done twice, but the lung mass has not been biopsied.

Mr. Keating has a 20-40 pack year smoking history but quit in 2000. He has an extensive history of asbestos exposure during the several years he spent in the Navy working in the engine room and he also worked as a refrigeration technician. He was never in Viet Nam. Back pain has been present for several weeks or months and is most severe in the early mornings subsiding by 11 o'clock in the morning. He has not taken pain medication and has no back pain now. He has also lost about 10 lb weight recently but says he loses 10 lb every summer and gains it back in the winter. He spends winters in the Phoenix area and summers in Heber. A daughter lives in Glendale. He would like to have evaluations and treatment here at Mayo Clinic and he saw Dr. Schild earlier today to discuss radiation. He does not yet have a good handle on his diagnosis and treatment plans.

CURRENT MEDICATIONS: Spiriva inhaler and Anacin

ALLERGIES: No known drug allergies

Past Medical History/Past Surgical History: Chronic lower back pain, poor dentition with few remaining teeth, asbestos exposure, baseline neuropathy fingers/toes, tonsillectomy, cholecystectomy

SOCIAL HISTORY: He is a widower living in Phoenix in the winter and Heber in the summer. He is from PA originally. A daughter lives in Glendale. Two sons live in WY and he tells me his grandson has recently shot a moose. Generally active in the winter including hiking, riding his trike or one of his 2 ATVs.

FAMILY HISTORY: Black lung disease from coal mining.

REVIEW OF SYSTEMS

ECOG PS 1. Riding his Harley trike and ATVs. Living alone and self sufficient. Dry cough but some hemoptysis after bronchoscopy. Nocturia and hesitancy. Easy bruising. All systems are otherwise negative.

PHYSICAL EXAM

Vital Signs: 169.1 cm. 70.4 Kg. Blood pressure 128/80, pulse 47, temperature 36.6 C. SpO2 94%
WDWN NAD
HEENT poor dentition, tongue coated.
Skin multiple keratoses, dry
Lungs normal effort, mildly hoarse.
COR: RRR
Extrem: No CCE
Neuro: Alert and oriented. Normal gait and station.

DATA:

Pathology: Biopsy of the 4R lymph node with high-grade non-small cell lung cancer consistent with an adenocarcinoma. Repeat with similar findings. Tumor cells sparse. Likely insufficient for further testing.

Chest CT July 30th LUL/hilar 4.4 cm mass with associated mediastinal adenopathy. Lytic area in the lower thoracic or upper lumbar region partially imaged. Scattered small lung nodules.

CT/PET in June 2018 with 4.8 cm left hilar mass with an SUV of 9 and borderline nodes. The area of the bone lesion seen on CT was not felt to be concerning on the PET/CT.

MRI of the brain was performed without contrast and revealed no evidence of brain metastasis.

Pulmonary function tests revealed an FEV1 of 1.62 or 60% of normal, improving 8% with bronchodilators. DLCO 13.09 or 59% of normal. Oxygen saturation was 95% at rest and 92% with exercise.

July labs with bili 1.7, GLU 177, WBC 9.8 otherwise WNL. Creatinine 1.0

IMPRESSION/REPORT/PLAN

Mr. Francis Keating is a very pleasant 81-year-old gentleman with a clinical T2 N2 M0 high-grade lung adenocarcinoma. Dr. Schild and I have recommended a repeat PET for both staging and treatment planning and to re-evaluate the area of the low back although the nature of his symptoms suggest this is more likely arthritis. In the face of extensive cancer in the chest, we do have to exclude metastases. Dr. Schild will need the new scan for RT planning and will discuss RT options with Mr. Keating after the scan. I explained that if the cancer still appears locally advanced, we will plan chemoradiotherapy with curative intent. I'm hopeful that we can complete a course of weekly low dose carboplatin along with radiation but we may have to abbreviate chemotherapy if it proves too toxic together with radiation.

If he is eligible, Dr. Schild is considering the proton trial and I agree with this plan. He is not a good candidate for AFT-16 trial due to the need for prolonged immunotherapy and delay in radiation start.

We will see Mr. Keating back to coordinate care once Dr. Schild has a radiation plan.

Document info**1 of 2**

	RadOnc Consult
Result date:	Aug 15, 2018, 03:18 p.m.
Result status:	authenticated
Performed by:	Steven Schild
Verified by:	Steven Schild
Modified by:	Steven Schild

Patient:	KEATING, FRANCIS J	DOB:
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REFERRED BY: Dr. Sakata

CHIEF COMPLAINT: Lung cancer

HISTORY OF PRESENT ILLNESS: This is a very pleasant 82-year-old gentleman seen for lung. He has a 40 pack year smoking history but quit in the year 2000. He has an extensive history of asbestos exposure during the several years he spent in the Navy. He also has chronic back pain for duration greater than 3 months. This pain is most severe in the early mornings when he rises and can be as severe as 8/10. However, by 11 o'clock in the morning is generally gone. He has no back pain now. He has also lost about 10 lb weight recently and has a diminished appetite. His ECOG performance score is about a 1. He does all his normal activities and still drives both a truck and a motorcycle.

CURRENT MEDICATIONS: Spiriva inhaler and aspirin

ALLERGIES: No known drug allergies

Past Medical History/Past Surgical History: Chronic lower back pain, poor dentition with about 4 remaining teeth, asbestos exposure, status post tonsillectomy, status post cholecystectomy

Past Radiation History: None

SOCIAL HISTORY: He is a widower. He has 3 adult children, 1 of which lives in Arizona, he spends the summer in heber in the winter in Phoenix .

FAMILY HISTORY: Black lung disease from coal mining. This patient was originally from Pennsylvania.

REVIEW OF SYSTEMS

ECOG ps: 1. He is active but has lost about 10 lb. He wears glasses and is a bit hard of hearing. He has dizziness when rising. He has about 4 remaining teeth. He has a cough that is productive of sputum that can range from clear to pink. He has normal bowels. He has nocturia times 2-3. He has chronic lower back pain that seems most severe early in the morning and then goes away once he has been up for a while. He has a lump in his right thigh that has been present for several years in causes no symptoms. Is stable in size HIS no anxiety, depression nor endocrine problems.

PHYSICAL EXAM

Vital Signs: Blood pressure 128/65, pulse 63, temperature 36.1 C., weight 70.9 kg, height 175.3 cm.

He is a well developed well-nourished gentleman in no acute distress. Head is normocephalic. Oral exam reveals 4 remaining teeth and his tongue is coated suggesting the presence of thrush. Lungs were clear and respiratory effort was normal at rest. Heart was a bit irregular with possible premature beats. He had no bone pain to percussion of the spine or pelvis. He has no adenopathy in the neck supraclavicular axillary areas. Abdomen was soft, nontender, with no organomegaly. His right thigh has a soft mass measuring perhaps 5 cm medially.

IMPRESSION/REPORT/PLAN

Lab Data: Biopsy of the 4R lymph node station revealed high-grade non-small cell lung cancer consistent with an adenocarcinoma. A CT of the chest was obtained on July 30th and revealed a mass that was 4.4 cm in the left upper lobe and hilum. There was left hilar and mediastinal adenopathy. Also noted was a lytic area in the lower thoracic or upper lumbar region that was partially imaged. They were also some small nodules seen. A PET scan done almost 2 months ago revealed a 4.8 cm left hilar mass with an SUV of 9 there was hilar and mediastinal hypermetabolic lymph nodes present with an SUV of 3.5 there is a 0.8 cm hypermetabolic right upper lobe nodule with an SUV of 3.5. This was interpreted as showing a hypermetabolic left hilar mass with borderline enlarged and hypermetabolic left hilar and mediastinal lymph nodes. The right upper lobe nodule and other tiny nodularities were too small to characterize but were worrisome. An MRI of the brain was performed without contrast and revealed no evidence of brain metastasis.

Tests: Pulmonary function tests revealed an FEV1 of 1.62 or 60% of normal improving 8% with bronchodilators. His diffusion capacity was 13.09 or 59% of normal. Oxygen saturation was 95% at rest and 92% with exercise.

Impression: Mr. Keating is a very pleasant 81-year-old gentleman with a clinical T2 N2 M0 high-grade non-small cell lung cancer consistent with an adenocarcinoma. I have recommended a repeat PET for both staging and treatment planning and have requested this through the Cerner system. This will better clarify his current disease stage and be helpful for treatment planning. His previous PET is too old. I have also discussed the risks, benefits, side effects, alternatives, and potential complications of radiotherapy with the patient. His questions were answered. He appeared to understand and wished to proceed as outlined above. Generally this would entail approximately 30 treatments and a request for simulation was also submitted through the Cerner system. I also mentioned to him the possibility of participating in a trial. For stage III disease there is an immunotherapy trial and a proton therapy trial. He sees Dr. Ross later today for evaluation and opinion. I have also sent a prescription for nystatin to his local pharmacy.

Total time with patient 60 minutes; 45 minutes counseling.

1012
 Result type: Cytology Fine Needle Aspiration
 Result date: Aug 13, 2018, 08:00 a.m.
 Result status: authenticated
 Performed by: Matthew Zarka
 Verified by: Matthew Zarka
 Modified by: Matthew Zarka

Cytology Fine Needle Aspiration

Patient: KEATING, FRANCIS J DOB:

INTERPRETATION

- A. Lymph node, station 4R, EBUS fine needle aspiration (smears/cell block): Positive for malignancy. Metastatic non small cell carcinoma, high-grade, consistent with adenocarcinoma; see Comment.
- B. Lung, upper lobe, left, biopsy (core biopsy): Scattered fragments of respiratory-lined mucosal tissue, with underlying pulmonary parenchyma, with focal areas of crush artifact. Negative for carcinoma.
- C. Lung, mainstem, left, biopsy (core biopsy): Fragments of respiratory-lined mucosal tissue, with areas of atypical immature squamous metaplasia, associated with mild acute and chronic inflammation, with underlying granulation tissue formation. No definitive evidence of invasive carcinoma.

COMMENT

The station 4 lymph node fine needle aspiration biopsy slides, show rare clusters of high-grade non small cell carcinoma, consistent with adenocarcinoma. Although the cell block preparation shows lymph node elements, the cell block does not show definitive viable tumor. Therefore, there is insufficient material to perform additional ancillary studies on this specimen.

Case reviewed with Dr. B. Larsen.

Screened at Mayo Clinic Arizona
 13400 E. Shea Blvd
 Scottsdale, AZ 85259

GROSS DESCRIPTION

A: On-site adequacy assessment performed by cytotechnologist KRF.

Adequacy achieved on pass # 1 for part "A".

Received 4 alcohol-fixed smears and 20 cc of cloudy bloody fluid in saline. Prepared 1 formalin fixed cell block A1.

Grossed by: KIM ROSE FUSON, CT(ASCP)

B: Received in formalin labeled "Keating, Francis" and "left upper lobe" are multiple fragments measuring 0.4 x 0.4 x 0.1 cm in aggregate. The specimen is entirely submitted in one block.

Gross examination performed by: BARBARA PHILLIPS HT(ASCP)
8/13/2018 hmp

C: Received in formalin labeled "Keating, Francis" and "left mainstem bronchi" are three fragments of tan soft tissue ranging from 0.2 to 0.3 cm. The specimen is entirely submitted in one block.

Gross examination performed by: BARBARA PHILLIPS HT(ASCP)
8/13/2018 hmp

SOURCE

- A. Lymph node, station 4R, EBUS fine needle aspiration
- B. Lung, upper lobe, left, biopsy
- C. Lung, mainstem, left, biopsy

CLINICAL HISTORY

Left upper lobe mass. EBUS on 8/6/2018 showed adenocarcinoma. Here to obtain more tissue for molecular/mutational analysis.

REPORT ELECTRONICALLY SIGNED BY

Matthew A. Zarka, M.D., 1-8148

I verify that I have examined all relevant slides/materials for the specimen(s) and rendered or confirmed the diagnosis.
Mayo Clinic Arizona 13400 E. Shea Boulevard, Scottsdale, AZ 85259

CASE NUMBER

NA-18-3743

REVIEW OF SYSTEMS

ECOG PS 1. Riding his Harley trike and ATVs. Living alone and self sufficient. Dry cough but some hemoptysis after bronchoscopy. Nocturia and hesitancy. Easy bruising. All systems are otherwise negative.

PHYSICAL EXAM

Vital Signs: 169.1 cm. 70.4 Kg. Blood pressure 128/80, pulse 47, temperature 36.6 C. SpO2 94%

WDWN NAD

HEENT poor dentition, tongue coated.

Skin multiple keratoses, dry

Lungs normal effort, mildly hoarse.

COR: RRR

Extrem: No CCE

Neuro: Alert and oriented. Normal gait and station.

DATA:

Pathology: Biopsy of the 4R lymph node with high-grade non-small cell lung cancer consistent with an adenocarcinoma. Repeat with similar findings. Tumor cells sparse. Likely insufficient for further testing.

Chest CT July 30th LUL/hilar 4.4 cm mass with associated mediastinal adenopathy. Lytic area in the lower thoracic or upper lumbar region partially imaged. Scattered small lung nodules.

CT/PET in June 2018 with 4.8 cm left hilar mass with an SUV of 9 and borderline nodes. The area of the bone lesion seen on CT was not felt to be concerning on the PET/CT.

MRI of the brain was performed without contrast and revealed no evidence of brain metastasis.

Pulmonary function tests revealed an FEV1 of 1.62 or 60% of normal, improving 8% with bronchodilators. DLCO 13.09 or 59% of normal. Oxygen saturation was 95% at rest and 92% with exercise.

July labs with bili 1.7, GLU 177, WBC 9.8 otherwise WNL. Creatinine 1.0

IMPRESSION/REPORT/PLAN

Mr. Francis Keating is a very pleasant 81-year-old gentleman with a clinical T2 N2 M0 high-grade lung adenocarcinoma. Dr. Schild and I have recommended a repeat PET for both staging and treatment planning and to re-evaluate the area of the low back although the nature of his symptoms suggest this is more likely arthritis. In the face of extensive cancer in the chest, we do have to exclude metastases. Dr. Schild will need the new scan for RT planning and will discuss RT options with Mr. Keating after the scan. I explained that if the cancer still appears locally advanced, we will plan chemoradiotherapy with curative intent. I'm hopeful that we can complete a course of weekly low dose carboplatin along with radiation but we may have to abbreviate chemotherapy if it proves too toxic together with radiation.

If he is eligible, Dr. Schild is considering the proton trial and I agree with this plan. He is not a good candidate for AFT-16 trial due to the need for prolonged immunotherapy and delay in radiation start.

We will see Mr. Keating back to coordinate care once Dr. Schild has a radiation plan.

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2012
Result type: Cytology Fine Needle Aspiration
Result date: Aug 13, 2018, 08:00 a.m.
Result status: authenticated
Performed by: Matthew Zarka
Verified by: Matthew Zarka
Modified by: Matthew Zarka

Cytology Fine Needle Aspiration

Patient: KEATING, FRANCIS J DOB:

INTERPRETATION

A. Lymph node, station 4R, EBUS fine needle aspiration (smears/cell block): Positive for malignancy. Metastatic non small cell carcinoma, high-grade, consistent with adenocarcinoma; see Comment.

B. Lung, upper lobe, left, biopsy (core biopsy): Scattered fragments of respiratory-lined mucosal tissue, with underlying pulmonary parenchyma, with focal areas of crush artifact. Negative for carcinoma.

C. Lung, mainstem, left, biopsy (core biopsy): Fragments of respiratory-lined mucosal tissue, with areas of atypical immature squamous metaplasia, associated with mild acute and chronic inflammation, with underlying granulation tissue formation. No definitive evidence of invasive carcinoma.

COMMENT

The station 4 lymph node fine needle aspiration biopsy slides, show rare clusters of high-grade non small cell carcinoma, consistent with adenocarcinoma. Although the cell block preparation shows lymph node elements, the cell block does not show definitive viable tumor. Therefore, there is insufficient material to perform additional ancillary studies on this specimen.

Case reviewed with Dr. B. Larsen.

Screened at Mayo Clinic Arizona

13400 E. Shea Blvd

Scottsdale, AZ 85259

GROSS DESCRIPTION

Result type: PET CT Skull -Thigh
Result date: Aug 17, 2018, 02:07 p.m.
Result status: authenticated
Performed by: Ming Yang
Verified by: Ming Yang
Modified by: Ming Yang
Accession number: 545196754-1

Patient:	KEATING, FRANCIS J	DOB:
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Name : Francis J. Keating
MRN : 06-864-829-4

Ordering Physician : 1933 SCHILD, STEVEN E, M.D.
Creation Date : 08/17/2018
Performed At : Mayo Building Phx Campus
Indications : Malignant neoplasm of upper lobe, left bronchus or;staging &
RTplanning lung ca

17-Aug-2018 15:40 *** Final ***

NM PET/CT Skull -Thigh
IMPRESSION: Allowing technical difference between current study and outside PET/CT study, there is stable left lung central heterogeneously hypermetabolic mass lesion, concerning for primary malignancy. Multiple left hilar/mediastinal hypermetabolic lymph nodes, concerning for metastasis.

Right apex subcentimeter hypermetabolic nodule, concerning for satellite lesion.

Left adrenal gland hypermetabolic nodule, concerning for metastasis.

Hypermetabolic lesion involving the L1 vertebral body with possible pathologic fracture, metastasis.

PET/CT SKULL TO THIGH

2 of 3

INDICATION: Lung cancer. Subsequent treatment strategy.

RADIOPHARMACEUTICAL: 10.06 mCi F-18 FDG i.v.

TECHNIQUE: Positron emission tomography of TORSO from skull base to upper thighs was performed in this fasting, nondiabetic patient with a dedicated ring detector PET/CT scanner 60 minutes after radiopharmaceutical injection. Noncontrast CT was performed for attenuation correction and anatomic correlation. Automated, variable CT mA dose adjustment used. Glucometer blood glucose was 188 mg/dL prior to tracer injection.

CLINICAL INFORMATION: Lung cancer. Radiation planning. Restaging.

COMPARISON: Outside PET/CT 6/27/2018. CT chest 7/30/2018. MR brain 8/8/2018.

FINDINGS:

HEAD/NECK: The visualized brain parenchyma is unremarkable. Physiological FDG uptake is noted in the salivary glands and tonsillar tissue. There is no hypermetabolic cervical or supraclavicular lymphadenopathy.

CHEST: Redemonstration right lung central heterogeneously hypermetabolic mass lesion measuring 4.5 x 4.0 cm on image #90, max SUV 8.8, previously 4.7 x 4.6 cm, max SUV 8.9.

Cluster of left hilar hypermetabolic lymph node extending to the AP window with max SUV 5.0, previously 4.3.

Precarinal hypermetabolic lymph node with max SUV 3.8, previously 3.4.

Bilateral lung multifocal calcified pleural plaques.

Right lower lung pleural-based consolidation measuring 3.1 x 1.7 cm on image #102, max SUV 2.0, previously 2.8 x 1.5 cm with max SUV 2.6.

Right apex medial aspect small hypermetabolic nodule with max SUV 2.2, previously 3.3.

Physiologic FDG uptake is seen in the myocardium.

ABDOMEN/PELVIS: Physiological FDG uptake is seen throughout the liver, spleen, and bowel/colon. Left adrenal gland hypermetabolic lesion measuring 1.3 cm with max SUV 4.9, previously measuring 1.2 cm with max SUV 3.6. The right adrenal gland is unremarkable. There is physiologic FDG excretion in the kidneys and bladder. There is no abdominal, pelvic or inguinal

lymphadenopathy.

MUSCULOSKELETAL: L1 vertebral body mixed lytic and sclerotic change with max SUV 6.8, previously 5.7. There is associated mild vertebral highlight, worrisome for pathologic fracture.

NOTE: Standardized Uptake Values (SUV), if noted in this report, are used for estimating whether changes between exams are significant or not, and for providing referring physicians with a semi-objective measure on which to base clinical decisions. SUV values are only an estimate. Reported values for given abnormality may vary slightly between radiologist interpretations. SUV value is determined by the interpreting radiologist based on the information at hand on the day of exam, and should not be considered as absolute value that will be reported on future interpretations.

Electronically signed by:
Ming Yang, M.D. 17-Aug-2018 15:40



U.S. POSTAGE» PITNEY BOWES



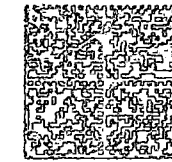
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